

BOX 401, 40 KING STREET WEST, TORONTO, CANADA M5H 3Y2 PHONE (416) 364-7311 • FAX (416) 361-1398 • WWW.BERESKINPARR.COM

Please type a plus sign (+) inside this box -> + PTO/SB/01 (12-97) Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. 5562-769/PMdC **Attorney Docket Number DECLARATION FOR UTILITY OR** Conrad et al **First Named Inventor DESIGN COMPLETE IF KNOWN** PATENT APPLICATION (37 CFR 1.63) **Application Number** n/a Filing Date Declaration □ Declaration OR n/a Submitted after Initial Submitted **Group Art Unit** Filing (surcharge (37 CFR 1.16 (e)) with Initial **Examiner Name** Filing n/a required)

	l l			·						
As a below named inventor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
METHOD AND APPAR ZONE	RATUS FOR CONCENTR	ATING A GAS USING A	A SINGLÉ ST	AGE ADSORPTION						
the specification of which is attached hereto	) (Title	e of the Invention)								
	OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number	and wa	as amended on (MM/DD/Y)	YYY)	(if applicable).						
I hereby state that I have re amended by any amendment	eviewed and understand the ent specifically referred to abo	contents of the above ident	ified specificatio	n, including the claims, as						
• •	disclose information which is		defined in 37 CF	FR 1.56.						
certificate, or 365(a) of any	PCT international applications by a	n which designated at leas checking the box, any foreign	st one country on application fo	cation(s) for patent or inventor's other than the United States of or patent or inventor's certificate, ority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.										
Application Number	(s) Filing Date	e (MM/DD/YYYY)	numbe supple	onal provisional application ers are listed on a emental priority data sheet SB/02B attached hereto.						
	1	1								

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



	•
<del>[ ]</del>	PTO/SB/01 (12-97)
Please type a plus sign (+) inside this box 🔫 \Bigg 🛨	Approved for use through 9/30/00. OMB 0651-0032
	Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of	of 1995, no persons are required to respond to a collection of information unless it contains

a valid OMB control number.

# **DECLARATION** — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.														
U.S. Parent Application or PCT Parent Number					Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)						
					February 1, 1999			n/a						
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.											nereto.			
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Parand Trademark Office connected therewith:  Customer Number  OR  Registered practitioner(s) to prosecute this application and to transact all business in the Parand Trademark Office connected therewith:  Customer Number  OR  Registered practitioner(s) name/registration number listed below								omer Code						
	Nam				Regis	tration				Nam				stration
Daniel R. Berr Richard J. Par H. Roger Hart David W.R. La C. Lloyd Sarg Timothy J. Sir	eskin irr t angton iinson	<u> </u>		22,25 22,83 26,42 27,74 29,24 31,08	57 36 26 47 45	mber		Rame Numbe H. Samuel Frost 31,696 Philip Mendes da Costa 33,106 Robert B. Storey 33,108 John R. Rudolph 38,003 Robin L.A. Coster 38,016 Michael E. Charles 38,036				mber		
		d practitioner(s) n				l Registere	d Prac					/SB/020		eto.
Direct all corre	espondo		Custom or Bar C							OR	<b>∠</b> c	orrespo	ondence add	ress below
Name	Beres	kin & Parr												
Address	Box 4	01												
Address	40 Kin	ng Street We	st											
City	Toron	to						tate		ario	ZIP	М5Н	3Y2	
Country	Canac	la		T	elepho	<sub>ne</sub> (416)	364				(416)	) 361-1398	}	
believed to be punishable by	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									o made are				
Name of Sc	ole or f	irst Inventor	r:					A petiti	ion h	as been	filed fo	r this u	ınsigned inve	ntor
Given Name (first and middle (if any))						Family Name or Surname								
WAYNE EF	RNES	Γ					CC	NRA	'D					
Inventor's Signature													Date	
Residence: City Hampton State Ontario			Ontario	$\prod_{c}$	ountry	, с	anada			Citizenship	Canadian			
Post Office Ad	ddress	27 King Street												
Post Office A	ddress	as above												
City		Hamaton Ontario				ZIP	LOB 1J0 Country			intry	, Canada			
Additional	invento	rs are being na		n the	SU	polement	al Add	ditional	Inve	entor(s) s	heet(s'	) PTO/	SB/02A attac	hed hereto

Please type a plus sign (+) inside this box -> +	PTO/SB/02A (3-97) Approved for use through 9/30/98. OMB 0651-0032 Patent and Trademark office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of	1995, no persons are required to respond to a collection of information unless it contains a

# **DECLARATION**

valid OMB control number.

### **ADDITIONAL INVENTOR(S)** Supplemental Sheet Page \_\_\_ of \_\_\_

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any]) Family Name or S							Sumam	umame			
HELMUT GERHARD CONRAD											
Inventor's Signature	Date										
Residence: City	Hampton State Ontari			rio	Country	Canada	Citizen	ship (	Canadian		
Post Office Address	27 King Street										
Post Office Address	as above										
City	Hampton		State	Ontar	io.	ZiP	L0B 1J0	Countr	Can	Canada	
Name of Addition	nal Joint Inventor, if a	ny:				A petiti	on has been file	ed for th	nis unsig	ned in	ventor
Given Na	me (first and middle [if any	/])					Family Na	me or	Sumame	,	
TED	SZYLOWIEC										
Inventor's Signature	Date										
Residence: City	Hampton State Ontario		io	Country	Canada	Citize	nship	Canadian			
Post Office Address	27 King Street										
Post Office Address	as above										
City	Hampton		State Ontario		rio	ZIP LOB 1JO C		Cour	<sub>untry</sub> Canad		a
Name of Addition	nal Joint Inventor, if ar	ny:				A petitie	on has been file	ed for th	is unsig	ned in	entor/
Given Name (first and middle [if any]) Family Name or Sumame											
Inventor's Signature	. D						ate				
Residence: City	State					Country Citizenship					
Post Office Address											
Post Office Address						1					
City		Si	ate		•	ZIP		0	ountry		

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box ->

# **DECLARATION**

#### **REGISTERED PRACTITIONER INFORMATION** (Supplemental Sheet)

Name	Registration Number	Name	Registration Number
	40,261	Robert H.C. MacFarlane	40,366
	40,453	Stephen M. Beney	41,563
Shawn D. Jacka	43,379	All of Bereskin & Parr	22,533
5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5	10,070	All Of Dereskin & Lan	22,000
		ı	
		,	
			·
			·
			:

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

